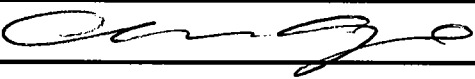
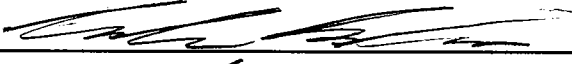


TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/550,722
	Filing Date	September 26, 2006
	First Named Inventor	Dan Smith
	Art Unit	1635
	Examiner Name	Zara, Jane J.
Total Number of Pages in This Submission	Attorney Docket Number	027607-000810US

ENCLOSURES (Check all that apply)					
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	<table border="1"> <tr> <td>Remarks</td> <td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td> </tr> </table>	Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm Name	Townsend and Townsend and Crew LLP				
Signature					
Printed name	Chuan Gao				
Date	11/14/08	Reg. No.	54,111		

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being filed via EFS-Web with the United States Patent and Trademark Office on the date shown below.			
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